SB 1104 IHSS/PCSP QA INITIATIVE OVERVIEW

INTRODUCTION

- THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES (CDSS) ISSUED ALL COUNTY INFORMATION NOTICE (ACIN) NO. I-69-04 TO:
 - > PROVIDE INFORMATION REGARDING THE IN-HOME SUPPORTIVE SERVICES/PERSONAL CARE SERVICES PROGRAM (IHSS/PCSP) QUALITY ASSURANCE (QA)
 - > PROVIDE PROGRAM INTEGRITY PROVISIONS OF FISCAL YEAR (FY) 2004/05 IN ACCORDANCE WITH SENATE BILL (SB) 1104, CHAPTER 229, STATUTES OF 2004

INTRODUCTION (continued)

- SB 1104 OUTLINED A NUMBER OF ACTIVITIES TO BE PERFORMED BY CDSS, CALIFORNIA DEPARTMENT OF HEALTH SERVICES (CDHS), AND THE COUNTIES SUCH AS:
 - > STATE AND COUNTY STAFFING AUGMENTATIONS SPECIFICALLY FOR QA ACTIVITIES
 - > FUNDING TO ESTABLISH AN ONGOING STATE TRAINING COMPONENT FOR IHSS/PCSP WORKERS
 - > FUNDING FOR SPECIFIED SYSTEMS CHANGES TIED TO QA AND PROGRAM INTEGRITY

STAKEHOLDER MEETINGS

- SB 1104 REQUIRES THE STATE TO CONVENE PERIODIC MEETINGS WITH COUNTIES AND PROGRAM STAKEHOLDERS TO:
 - PROVIDE INFORMATION TO STAKEHOLDERS AND RECEIVE INPUT FROM STAKEHOLDERS ON THE REQUIRED IHSS QA PROGRAM INTEGRITY AND PROGRAM CONSISTENCY EFFORTS BEING DEVELOPED AND IMPLEMENTED BY CDSS, CDHS, AND THE COUNTIES

STAKEHOLDER MEETINGS (continued)

- IHSS QA PROGRAM SUBJECT MATTER REQUIRED FOR STAKEHOLDER MEETINGS INCLUDE:
 - > HOURLY TASK GUIDELINES
 - > VARIABLE ASSESSMENT INTERVALS
 - > ALTERNATIVES TO A FULL REASSESSMENT FOLLOWING DISCHARGE FROM A MEDICAL FACILITY
 - > STANDARDIZED PROTECTIVE SUPERVISION MEDICAL CERTIFICATION FORM
 - > STATEWIDE COUNTY TRAINING PROGRAM
 - > VERIFICATION OF CLIENT RECEIPT OF SERVICES

SB 1104 QA INITIATIVE OBJECTIVES

IMPROVE THE QUALITY OF IHSS NEEDS ASSESSMENTS

- DEVELOP AND PROVIDE ONGOING STATEWIDE TRAINING AND FORMAL MONITORING AT THE STATE AND LOCAL LEVEL
- STATEWIDE TRAINING PROGRAM FOR COUNTY IHSS STAFF TO INCLUDE:
 - > THE IHSS UNIFORMITY SYSTEM
 - RULES AND POLICIES GOVERNING NEEDS ASSESSMENTS
 - EMERGING IHSS QA AND PROGRAM INTEGRITY POLICIES AND PROCEDURES

IMPROVE THE QUALITY OF IHSS NEEDS ASSESSMENTS (continued)

- COUNTIES REQUIRED TO PERFORM IHSS PROGRAM INTEGRITY CASE REVIEW ON A ROUTINE BASIS
- STATE REQUIRED TO MONITOR COUNTY QA ACTIVITY
- VARIABLE REASSESSMENT INTERVALS TO ALLOW COUNTIES TO BETTER FOCUS RESOURCES WHERE COSTS CAN BE AVOIDED, SUCH AS:
 - > WAITING LONGER TO REASSESS STABLE CASES
 - > ALLOWING RESOURCES TO BE APPLIED TO CASES THAT MIGHT IMPROVE WITHIN 12 MONTHS

CREATE IHSS PROGRAM PROCESS CONSISTENCY

- STANDARD STATEWIDE COUNTY IHSS STAFF TRAINING
- DEDICATED SPECIALIZED COUNTY QA AND PROGRAM INTEGRITY UNIT OR FUNCTION
- HOURLY TASK GUIDELINES
- PROGRAM PROVIDER PARTICIPATION STANDARDS AND ENROLLMENT PROCESS

CREATE IHSS PROGRAM PROCESS CONSISTENCY (continued)

STATEWIDE PROTECTIVE SUPERVISION MEDICAL CERTIFICATION FORM

 CONSISTENT STATE/COUNTY QA AND PROGRAM INTEGRITY PROTOCOLS AND PROCEDURES

UPDATED PROGRAM REGULATIONS

DETECT AND PREVENT IHSS PROGRAM FRAUD

- CDSS AND COUNTIES REQUIRED TO PUBLICIZE AVENUES FOR REPORTING SUSPECTED FRAUD AND ABUSE TO THE STATE
- EACH COUNTY REQUIRED TO HAVE A DEDICATED IHSS QA FUNCTION AND CARRY OUT SPECIFIED FRAUD DETECTION AND PREVENTION ACTIVITIES

ASSURE IHSS PROGRAM INTEGRITY

- IHSS PROVIDER PARTICIPATION STANDARDS AND REQUIREMENTS
- ALL PROGRAM PROVIDERS REQUIRED TO ENROLL IN THE PROGRAM
- STANDARD PROCEDURES TO IDENTIFY AND RECOVER INAPPROPRIATE IHSS PROGRAM PAYMENTS USING APPROPRIATE DUE PROCESS AND APPLICABLE LABOR LAWS

ASSURE IHSS PROGRAM INTEGRITY (continued)

- STANDARD PROCESSES TO IDENTIFY AND RECOVER IHSS PROGRAM PAYMENTS FROM LIABLE THIRD PARTIES
- ROUTINE ERROR STUDIES AND IHSS/MEDI-CAL PAID SERVICES DATA MATCHES TO IDENTIFY POTENTIALLY INAPPROPRIATE OR DUPLICATE PAYMENTS
- LEGAL DEFINITION OF IHSS "OVERPAYMENTS" TO PROVIDE STATE/COUNTY LEGAL AUTHORITY TO RECOVER OVERPAYMENTS

WORKGROUP/COMMITTEE REQUIREMENTS

IMPLEMENTATION MEETINGS

IHSS/MEDI-CAL CLAIMS DATA MATCHES

ANNUAL ERROR RATE STUDY

VARIABLE ASSESSMENT INTERVALS

IMPLEMENTATION WORKGROUPS

- STATEWIDE ASSESSMENT TRAINING PROGRAM
- HOURLY TASK GUIDELINES
- PROVIDER PARTICIPATION, INCLUDING ENROLLMENT FORM DEVELOPMENT, EXCLUSION RULES AND PROCEDURES, REPORTING PROCESSES, NOTICE AND DUE PROCESS
- STANDARD PROTECTIVE SUPERVISION MEDICAL CERTIFICATION FORM
- IHSS REGULATIONS REVISION

ONGOING STATE/COUNTY OPERATIONS COMMITTEE

- STATE/COUNTY METHODS, PROTOCOLS, PROCEDURES AND INSTRUCTIONS:
 - > POLICIES AND PROCEDURES GOVERNING STATE MONITORING OF COUNTY QA PROGRAMS
 - > IHSS/MEDI-CAL DATA MATCH DEVELOPMENT, COUNTY ACTIONS ON DATA MATCH DISCREPANCIES
 - COUNTY IDENTIFICATION OF THIRD PARTY LIABILITY FOR IHSS
 - ► LOCAL PROGRAM MONITORING BY COUNTIES TO DETECT/PREVENT FRAUD AND MAXIMIZE RECOVERY OF OVERPAYMENTS

ONGOING STATE/COUNTY OPERATIONS COMMITTEE (continued)

- STATE/COUNTY INFORMING OF RECIPIENTS, PROVIDERS AND THE GENERAL PUBLIC OF THE MEDI-CAL TOLL-FREE LINE AND CDHS WEBSITE FOR REPORTING SUSPECTED FRAUD
- JOINT STATE/COUNTY CASE REVIEWS, INCLUDING RANDOM POST-PAYMENT CLAIMS REVIEWS
- COLLABORATIVE WORK WITH CDHS TO IDENTIFY, REFER, INVESTIGATE, AND TAKE ADMINISTRATIVE ACTION ON OR PROSECUTE FRAUD
- OVERPAYMENT IDENTIFICATION, NOTICE, DUE PROCESS AND RECOVERY

STAKEHOLDER MEETING SUBCOMMITTEE

METHODS FOR VERIFYING RECIPIENT RECEIPT OF SERVICES

- ALTERNATIVES TO A FULL REASSESSMENT TO AUTHORIZE A TEMPORARY SERVICE INCREASE FOLLOWING DISCHARGE

WEBSITE POSTINGS OF IHSS INFORMATION

PRIORITIES

- STATEWIDE SOCIAL WORKER ASSESSMENT TRAINING PROGRAM
- IHSS REGULATIONS REVIEW AND REVISION
- HOURLY TASK GUIDELINES
- PROVIDER PARTICIPATION STANDARDS AND ENROLLMENT PROCESS
- COUNTY QA EVALUATION AND INTEGRITY CASE REVIEW PROCESS
- ANTI-FRAUD/OVERPAYMENT ACTIONS

IMPLEMENTATION

ALL QA PROVISIONS OF SB 1104 ANTICIPATED TO BE IMPLEMENTED BY JUNE 30, 2006.